



1-26-04

3762

PATENT #13

B. Webb
2/4/04

THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Gust H. Bardy et al.

Serial No.: 09/940,283

Examiner: K. Droesch

Filed: August 27, 2001

Group Art Unit: 3762

For: DUCKBILL-SHAPED IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR
CANISTER AND METHOD OF USE

Docket No.: 1201.1105101

LETTER TO OFFICIAL DRAFTSMAN

CERTIFICATE UNDER 37 C.F.R. 1.10: The undersigned hereby certified that this paper or papers, as described herein are being deposited in the United States Postal Service, "Express Mail Post Office to Addressee" having an Express Mail mailing label number of: EV 315612740 US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 23rd day of January 2004.

By Kathleen L. Boekley
Kathleen L. Boekley

Dear Sir:

Please find attached hereto fifteen (15) sheets of formal drawings for filing in the above-identified application.

Respectfully submitted,

Gust H. Bardy et al.

By their Attorney,

David M. Crompton

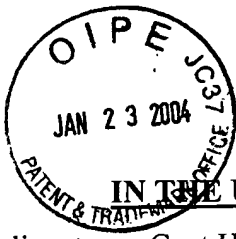
David M. Crompton, Reg. No. 36,772
CROMPTON, SEAGER & TUFTE, LLC
1221 Nicollet Avenue, Suite 800
Minneapolis, MN 55403-2420
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Date: 1/23/04

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TECHNOLOGY CENTER R3700



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Gust H. Bardy et al.

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We are transmitting herewith the attached:

- ☐ Amendment
☐ No additional fee required
☐ The fee has been calculated as shown:

CLAIMS AS AMENDED							
	(3)	(4)	(5)	SMALL ENTITY		OTHER	
	REMAINING CLAIMS	HIGHEST PAID	EXTRA	RATE	ADD'L FEE	RATE	ADD'L FEE
TOTAL CLAIMS	-	=		X 9=	\$	X 18=	\$
INDEPENDENT CLAIMS	-	=		X 43=	\$	X 86 =	\$
() FIRST MULTIPLE DEPENDENT CLAIM				+ 145 =	\$	+ 290 =	\$
TOTAL				\$		\$	

[] A check in the amount of \$_____ is enclosed. Itemization:

Fee Code _____ \$

Fee Code _____ \$

Fee Code _____ \$

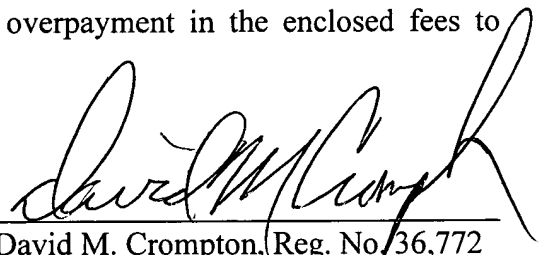
[XX] Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established.

[XX] Other: LETTER TO OFFICIAL DRAFTSMAN AND 15 SHEETS OF FORMAL DRAWINGS.

[XX] Return Receipt Postcard (MPEP 503).

[XXXX] Please charge any deficiencies or credit any overpayment in the enclosed fees to Deposit Account No. 50-0413.

By: _____



David M. Crompton, Reg. No. 36,772

Customer No. **28075**

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